

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

The Northwestern Mutual Life Insurance Company Federal PAC

ADDRESS (number and street) ▼

720 E Wisconsin Ave

☐ Check if different than previously reported. (ACC)

Milwaukee

WI

53202

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00197095

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michelle A. Hinze

Signature of Treasurer

Michelle A. Hinze

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

The Northwestern Mutual Life Insurance Company Federal PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 03 / 01 / 2014 To: M M / D D / Y Y Y Y Y 03 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		139753.89
(b) Cash on Hand at Beginning of Reporting Period.....	114095.62	
(c) Total Receipts (from Line 19)	31967.42	96794.41
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	146063.04	236548.30
7. Total Disbursements (from Line 31)	71243.17	161728.43
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	74819.87	74819.87
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

The Northwestern Mutual Life Insurance Company Federal PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y
 03 / 01 / 2014

To:

 M M / D D / Y Y Y Y
 03 / 31 / 2014
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

24371.66

94434.15

(ii) Unitemized

7594.72

2356.99

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

31966.38

96791.14

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

31966.38

96791.14

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

1.04

3.27

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

31967.42

96794.41

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

31967.42

96794.41

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	243.17	728.43
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	243.17	728.43
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	71000.00	156000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	5000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	71243.17	161728.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	71243.17	161728.43

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	31966.38	96791.14
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31966.38	96791.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	243.17	728.43
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	243.17	728.43

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 94

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Douglas P. Bates

Mailing Address 5413 Mount Corcoran PI

City State Zip Code
Burke VA 22015-2188

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Federal Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031319750-566

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

B. Douglas P. Bates

Mailing Address 5413 Mount Corcoran PI

City State Zip Code
Burke VA 22015-2188

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Federal Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-566

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

C. Blaise C. Beaulier

Mailing Address 23300 Dover Line Rd

City State Zip Code
Waterford WI 53185-4908

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Ent Projects & Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-980

Amount of Each Receipt this Period

36.00

SUBTOTAL of Receipts This Page (optional)..... ►

146.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Mitchell C. Beer

Mailing Address 3387 Hampton Ct

City

Thousand Oaks

State

CA

Zip Code

91362-1130

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-34

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Mitchell C. Beer

Mailing Address 3387 Hampton Ct

City

Thousand Oaks

State

CA

Zip Code

91362-1130

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-34

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

c. J. Philip Bender

Mailing Address 116 Belden Hill Rd

City

Wilton

State

CT

Zip Code

06897-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-37

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 94
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. J. Philip Bender

Mailing Address 116 Belden Hill Rd

City State Zip Code
Wilton CT 06897-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-37

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Beth M. Berger

Mailing Address 4141 N Murray Ave

City State Zip Code
Shorewood WI 53211-2011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NML

Ast Gn Cnl & Ast Sec/Secur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-563

Amount of Each Receipt this Period

34.00

Full Name (Last, First, Middle Initial)

C. Dwaan C. Black

Mailing Address 3520 Dumbarton Rd NW

City State Zip Code
Atlanta GA 30327-2614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-29

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

126.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 94
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Dwaan C. Black

Mailing Address 3520 Dumbarton Rd NW

City State Zip Code
 Atlanta GA 30327-2614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-29

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Garrett J. Bleakley

Mailing Address 5460 Chelsea Ave

City State Zip Code
 La Jolla CA 92037-7607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-9

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Garrett J. Bleakley

Mailing Address 5460 Chelsea Ave

City State Zip Code
 La Jolla CA 92037-7607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-9

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

192.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 94
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Debra Blevons

Mailing Address 165 Pine Ct

City State Zip Code
 Appleton WI 54914-8222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-67

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Debra Blevons

Mailing Address 165 Pine Ct

City State Zip Code
 Appleton WI 54914-8222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-67

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Timothy John Bohannon

Mailing Address 8677 Alvarado Ct

City State Zip Code
 Inver Grove MN 55077-3121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-11

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

408.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Timothy John Bohannon

Mailing Address 8677 Alvarado Ct

City

Inver Grove

State

MN

Zip Code

55077-3121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-11

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. Sandra L. Botcher

Mailing Address 10260 N Range Line Ct

City

Mequon

State

WI

Zip Code

53092-5346

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Disability Income

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031519750-837

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

C. Sandra L. Botcher

Mailing Address 10260 N Range Line Ct

City

Mequon

State

WI

Zip Code

53092-5346

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Disability Income

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-837

Amount of Each Receipt this Period

76.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

360.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 94
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Jennifer L. Brase

Mailing Address 12877 N Cobblestone Ct

City State Zip Code
 Mequon WI 53097-1812

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Div & Inclusion

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : 2014032719750-873

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. Michael T. Byrne

Mailing Address 395 La Casa Via

City State Zip Code
 Walnut Creek CA 94598-4842

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 15 2014

Transaction ID : 2014031782820-27

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

c. Michael T. Byrne

Mailing Address 395 La Casa Via

City State Zip Code
 Walnut Creek CA 94598-4842

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : 2014033119749-27

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

451.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Michael G. Carter

Mailing Address 7322 N Mohawk Rd

City

Fox Point

State

WI

Zip Code

53217-3454

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

EVP & CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031319750-987

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. Michael G. Carter

Mailing Address 7322 N Mohawk Rd

City

Fox Point

State

WI

Zip Code

53217-3454

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

EVP & CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-987

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. Greg Castronovo

Mailing Address 317 Evening Star Ln

City

Bozeman

State

MT

Zip Code

59715-7738

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-44

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

458.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 94
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Greg Castronovo

Mailing Address 317 Evening Star Ln

City State Zip Code
 Bozeman MT 59715-7738

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-44

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Scott G. Christensen

Mailing Address 12 High Meadow Ln

City State Zip Code
 Amherst NH 03031-2554

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-43

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Scott G. Christensen

Mailing Address 12 High Meadow Ln

City State Zip Code
 Amherst NH 03031-2554

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-43

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

292.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 94
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Eric P. Christophersen

Mailing Address N55W21701 Adamdale Dr

City State Zip Code
Menomonee Falls WI 53051-6272

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Pres & CEO Wealth Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 15 2014

Transaction ID : 2014031319750-711

Amount of Each Receipt this Period

77.00

Full Name (Last, First, Middle Initial)

B. Eric P. Christophersen

Mailing Address N55W21701 Adamdale Dr

City State Zip Code
Menomonee Falls WI 53051-6272

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Pres & CEO Wealth Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : 2014032719750-711

Amount of Each Receipt this Period

77.00

Full Name (Last, First, Middle Initial)

C. David D. Clark

Mailing Address 923 E Kilbourn Ave

City State Zip Code
Milwaukee WI 53202-3493

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Svp Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 15 2014

Transaction ID : 2014031319750-684

Amount of Each Receipt this Period

140.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

294.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. David D. Clark

Mailing Address 923 E Kilbourn Ave

City State Zip Code
 Milwaukee WI 53202-3493

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Svp Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014032719750-684

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

B. R. Michael Condrey

Mailing Address 907 Williamson Dr

City State Zip Code
 Raleigh NC 27608-2307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-4

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. R. Michael Condrey

Mailing Address 907 Williamson Dr

City State Zip Code
 Raleigh NC 27608-2307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-4

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

556.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 17 OF 94
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Tait Cruse

Mailing Address 2961 Belclaire Dr

City State Zip Code
Frisco TX 75034-5969

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-33

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. Tait Cruse

Mailing Address 2961 Belclaire Dr

City State Zip Code
Frisco TX 75034-5969

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-33

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. Brian R. Cunningham

Mailing Address 6251 S Billings Way

City State Zip Code
Centennial CO 80111-6009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-24

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

541.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Brian R. Cunningham

Mailing Address 6251 S Billings Way

City

Centennial

State

CO

Zip Code

80111-6009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-24

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Paul Dodd

Mailing Address 7078 E Genesee St

City

Fayetteville

State

NY

Zip Code

13066-1123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-30

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. Paul Dodd

Mailing Address 7078 E Genesee St

City

Fayetteville

State

NY

Zip Code

13066-1123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-30

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

541.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Steven Dugal

Mailing Address 9 Falcon Dr

City State Zip Code
Mandeville LA 70471-2952

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-31

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. Steven Dugal

Mailing Address 9 Falcon Dr

City State Zip Code
Mandeville LA 70471-2952

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-31

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. John E. Dunn

Mailing Address N71W31034 Lower Club Cir W

City State Zip Code
Hartland WI 53029-8716

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NML

VP & Ips Cnsl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031319750-637

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

466.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. John E. Dunn

Mailing Address N71W31034 Lower Club Cir W

City

Hartland

State

WI

Zip Code

53029-8716

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP & Ipas Cnsl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-637

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. James R. Effner Jr.

Mailing Address 2520 Hanford Ln

City

Aurora

State

IL

Zip Code

60502-6969

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031782820-35

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. James R. Effner Jr.

Mailing Address 2520 Hanford Ln

City

Aurora

State

IL

Zip Code

60502-6969

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-35

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

466.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 94

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. R. David Ells

Mailing Address 3722 W Grace Ave

City State Zip Code
Mequon WI 53092-2760

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Investment Strat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-891

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

B. Keith A. Erhard

Mailing Address 4807 Timberwood Ct

City State Zip Code
West Des Moines IA 50265-5447

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-19

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Keith A. Erhard

Mailing Address 4807 Timberwood Ct

City State Zip Code
West Des Moines IA 50265-5447

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-19

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

122.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. John C. Ertz

Mailing Address 18235 Shaker Blvd

City State Zip Code
 Shaker Heights OH 44120-1754

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-18

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. John C. Ertz

Mailing Address 18235 Shaker Blvd

City State Zip Code
 Shaker Heights OH 44120-1754

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-18

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Christina H. Fiasca

Mailing Address 9230 N Fairway Dr

City State Zip Code
 Bayside WI 53217-1317

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NML

Pres Nmis & VP Prod Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031319750-922

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Christina H. Fiasca

Mailing Address 9230 N Fairway Dr

City State Zip Code
 Bayside WI 53217-1317

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Pres Nmis & VP Prod Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014032719750-922

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Lance P. Franczyk

Mailing Address 2224 E 24th St

City State Zip Code
 Tulsa OK 74114-2912

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-46

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Lance P. Franczyk

Mailing Address 2224 E 24th St

City State Zip Code
 Tulsa OK 74114-2912

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-46

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Robert T. Frieling

Mailing Address 4 Windy Hill Ln

City

Wayland

State

MA

Zip Code

01778-2613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-17

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Robert T. Frieling

Mailing Address 4 Windy Hill Ln

City

Wayland

State

MA

Zip Code

01778-2613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-17

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Timothy J. Gerend

Mailing Address 5421 N Idlewild Ave

City

Whitefish Bay

State

WI

Zip Code

53217-5331

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Agencies

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031319750-630

Amount of Each Receipt this Period

86.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

336.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Timothy J. Gerend

Mailing Address 5421 N Idlewild Ave

City

Whitefish Bay

State

WI

Zip Code

53217-5331

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Agencies

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

516.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-630

Amount of Each Receipt this Period

86.00

Full Name (Last, First, Middle Initial)

B. Mitchell B. Glover

Mailing Address 6700 Old Darby Trl NE

City

Ada

State

MI

Zip Code

49301-8360

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031782820-15

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

c. Mitchell B. Glover

Mailing Address 6700 Old Darby Trl NE

City

Ada

State

MI

Zip Code

49301-8360

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-15

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

502.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Kimberley Goode

Mailing Address 2485 W Fairy Chasm Rd

City

River Hills

State

WI

Zip Code

53217-1536

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Comm & Corp Aff

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

516.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031319750-578

Amount of Each Receipt this Period

86.00

Full Name (Last, First, Middle Initial)

B. Kimberley Goode

Mailing Address 2485 W Fairy Chasm Rd

City

River Hills

State

WI

Zip Code

53217-1536

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Comm & Corp Aff

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

516.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-578

Amount of Each Receipt this Period

86.00

Full Name (Last, First, Middle Initial)

C. Patrick K. Gores

Mailing Address 2702 28th Ave S

City

Fargo

State

ND

Zip Code

58103-5045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-8

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

214.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Patrick K. Gores

Mailing Address 2702 28th Ave S

City

Fargo

State

ND

Zip Code

58103-5045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

252.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-8

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Tom Goris Jr.

Mailing Address 4735 Wellington Dr

City

Long Grove

State

IL

Zip Code

60047-5223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031782820-28

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Tom Goris Jr.

Mailing Address 4735 Wellington Dr

City

Long Grove

State

IL

Zip Code

60047-5223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-28

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

342.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Karl G. Gouverneur

Mailing Address 12895 N Cobblestone Ct

City

Mequon

State

WI

Zip Code

53097-1812

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP & Chief Tech Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031319750-1109

Amount of Each Receipt this Period

67.00

Full Name (Last, First, Middle Initial)

B. Karl G. Gouverneur

Mailing Address 12895 N Cobblestone Ct

City

Mequon

State

WI

Zip Code

53097-1812

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP & Chief Tech Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-1109

Amount of Each Receipt this Period

67.00

Full Name (Last, First, Middle Initial)

C. John M. Grogan

Mailing Address 7860 N Club Cir

City

Fox Point

State

WI

Zip Code

53217-2939

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Svp Planning & Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031319750-1030

Amount of Each Receipt this Period

109.00

SUBTOTAL of Receipts This Page (optional)..... ►

243.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. John M. Grogan

Mailing Address 7860 N Club Cir

City

Fox Point

State

WI

Zip Code

53217-2939

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Svp Planning & Sales

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

654.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-1030

Amount of Each Receipt this Period

109.00

Full Name (Last, First, Middle Initial)

B. Stephen Gross

Mailing Address 1022 Savonne Ct

City

Chesterfield

State

MO

Zip Code

63005-4977

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-47

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

C. Stephen Gross

Mailing Address 1022 Savonne Ct

City

Chesterfield

State

MO

Zip Code

63005-4977

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-47

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)..... ►

275.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Thomas C. Guay

Mailing Address W73N377 Mulberry Ave

City

Cedarburg

State

WI

Zip Code

53012-2648

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Field Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031319750-652

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

B. Thomas C. Guay

Mailing Address W73N377 Mulberry Ave

City

Cedarburg

State

WI

Zip Code

53012-2648

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Field Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-652

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

C. Stephen T. Guinan

Mailing Address 126 Waverly Cir

City

Phoenixville

State

PA

Zip Code

19460-2500

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-42

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

194.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Stephen T. Guinan

Mailing Address 126 Waverly Cir

City State Zip Code
 Phoenixville PA 19460-2500

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-42

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Kevin J. Hassan

Mailing Address 804 Montparnasse Pl

City State Zip Code
 Newtown Sq PA 19073-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-16

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Kevin J. Hassan

Mailing Address 804 Montparnasse Pl

City State Zip Code
 Newtown Sq PA 19073-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-16

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

292.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Gerard M. Hempstead

Mailing Address 49 W Walling Dr

City

Creve Coeur

State

MO

Zip Code

63141-7371

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

499.98

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031782820-57

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Gerard M. Hempstead

Mailing Address 49 W Walling Dr

City

Creve Coeur

State

MO

Zip Code

63141-7371

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

499.98

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-57

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

C. Mark J. Heurung

Mailing Address 3315 Graham Hill Rd

City

Orono

State

MN

Zip Code

55356-5501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031782820-41

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

374.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Mark J. Heurung

Mailing Address 3315 Graham Hill Rd

City

Orono

State

MN

Zip Code

55356-5501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-41

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. Gary M. Hewitt

Mailing Address 2045 Elm Tree Rd

City

Elm Grove

State

WI

Zip Code

53122-1117

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Treas & Inv Ops

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

510.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031519750-916

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

c. Gary M. Hewitt

Mailing Address 2045 Elm Tree Rd

City

Elm Grove

State

WI

Zip Code

53122-1117

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Treas & Inv Ops

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

510.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-916

Amount of Each Receipt this Period

85.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

378.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Steve H. Holter

Mailing Address 11390 N Creekside Ct

City State Zip Code
 Mequon WI 53092-4377

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-50

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. Steve H. Holter

Mailing Address 11390 N Creekside Ct

City State Zip Code
 Mequon WI 53092-4377

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-50

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. Brian J. Hubbell

Mailing Address 1701 E Westminster Ln

City State Zip Code
 Spokane WA 99223-6712

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-5

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

458.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Brian J. Hubbell

Mailing Address 1701 E Westminster Ln

City

Spokane

State

WA

Zip Code

99223-6712

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-5

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Scott Iodice

Mailing Address 1930 Old Court Rd

City

Ruxton

State

MD

Zip Code

21204-1849

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031782820-22

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Scott Iodice

Mailing Address 1930 Old Court Rd

City

Ruxton

State

MD

Zip Code

21204-1849

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-22

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

292.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Ronald P. Joelson

Mailing Address 825 N Prospect Ave
U

City Milwaukee State WI Zip Code 53202-3979

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

EVP & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031319750-530

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Ronald P. Joelson

Mailing Address 825 N Prospect Ave
U

City Milwaukee State WI Zip Code 53202-3979

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

EVP & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-530

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Todd M. Jones

Mailing Address W252N4956 Aberdeen Dr

City Pewaukee State WI Zip Code 53072-1351

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP & Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031319750-804

Amount of Each Receipt this Period

61.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

461.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Todd M. Jones

Mailing Address W252N4956 Aberdeen Dr

City State Zip Code
Pewaukee WI 53072-1351

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP & Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-804

Amount of Each Receipt this Period

61.00

Full Name (Last, First, Middle Initial)

B. Shawn F. Kelley

Mailing Address 16 Vintage Walk

City State Zip Code
Montgomery OH 45249-2101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-62

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

c. Shawn F. Kelley

Mailing Address 16 Vintage Walk

City State Zip Code
Montgomery OH 45249-2101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-62

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

311.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. John C. Kelly

Mailing Address 5806 N Kent Ave

City

Whitefish Bay

State

WI

Zip Code

53217-4612

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP & Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031319750-623

Amount of Each Receipt this Period

61.00

Full Name (Last, First, Middle Initial)

B. John C. Kelly

Mailing Address 5806 N Kent Ave

City

Whitefish Bay

State

WI

Zip Code

53217-4612

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP & Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-623

Amount of Each Receipt this Period

61.00

Full Name (Last, First, Middle Initial)

C. Troy B. Kemelgor

Mailing Address 8930 Dunn Ct

City

Dublin

State

OH

Zip Code

43017-8880

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-58

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

164.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Troy B. Kemelgor

Mailing Address 8930 Dunn Ct

City State Zip Code
Dublin OH 43017-8880

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-58

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. David Daniel Kiecker

Mailing Address 11696 Approach Blvd

City State Zip Code
Fishers IN 46037-4146

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-66

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. David Daniel Kiecker

Mailing Address 11696 Approach Blvd

City State Zip Code
Fishers IN 46037-4146

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-66

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. William S. Koch

Mailing Address 4645 Swilcan Bridge Ln S

City

Jacksonville

State

FL

Zip Code

32224-5621

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-13

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. William S. Koch

Mailing Address 4645 Swilcan Bridge Ln S

City

Jacksonville

State

FL

Zip Code

32224-5621

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-13

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. John L. Kordsmeier

Mailing Address 2522 W Daphne Rd

City

Glendale

State

WI

Zip Code

53209-3300

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Strat Phil & Comm Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031319750-1058

Amount of Each Receipt this Period

93.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

343.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. John L. Kordsmeier

Mailing Address 2522 W Daphne Rd

City

Glendale

State

WI

Zip Code

53209-3300

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Strat Phil & Comm Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-1058

Amount of Each Receipt this Period

93.00

Full Name (Last, First, Middle Initial)

B. Steven H. Kosnick

Mailing Address 5799 Windsona Cir

City

Fitchburg

State

WI

Zip Code

53711-5839

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-7

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Steven H. Kosnick

Mailing Address 5799 Windsona Cir

City

Fitchburg

State

WI

Zip Code

53711-5839

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-7

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

177.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Carol L. Kracht

Mailing Address 3357 N Lake Dr

City

Milwaukee

State

WI

Zip Code

53211-2908

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Dep Gc/Sec & Board Rel

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

204.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-988

Amount of Each Receipt this Period

34.00

Full Name (Last, First, Middle Initial)

B. M. Kevin Lawhon

Mailing Address 6952 Burnt Sienna Cir

City

Naples

State

FL

Zip Code

34109-7826

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

499.98

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031782820-53

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

C. M. Kevin Lawhon

Mailing Address 6952 Burnt Sienna Cir

City

Naples

State

FL

Zip Code

34109-7826

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

499.98

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-53

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Robert D. Lowrey

Mailing Address 1108 W Goldthread Cir

City State Zip Code
 Sioux Falls SD 57108-2824

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-12

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Robert D. Lowrey

Mailing Address 1108 W Goldthread Cir

City State Zip Code
 Sioux Falls SD 57108-2824

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-12

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Matthew James Lueder

Mailing Address 929 N Astor St
 Unit 507

City State Zip Code
 Milwaukee WI 53202-3482

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-65

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

126.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Matthew James Lueder

Mailing Address 929 N Astor St
Unit 507

City Milwaukee State WI Zip Code 53202-3482

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-65

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Jeffrey J. Lueken

Mailing Address 1213 E Goodrich Ln

City Fox Point State WI Zip Code 53217-2946

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NML

Svp Securities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031519750-909

Amount of Each Receipt this Period

168.00

Full Name (Last, First, Middle Initial)

C. Jeffrey J. Lueken

Mailing Address 1213 E Goodrich Ln

City Fox Point State WI Zip Code 53217-2946

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NML

Svp Securities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-909

Amount of Each Receipt this Period

168.00

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Cory A. Mahaffey

Mailing Address 13764 Knaus Rd

City

Lake Oswego

State

OR

Zip Code

97034-2175

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-61

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Cory A. Mahaffey

Mailing Address 13764 Knaus Rd

City

Lake Oswego

State

OR

Zip Code

97034-2175

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-61

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Raymond J. Manista

Mailing Address 7236 N Crossway Rd

City

Fox Point

State

WI

Zip Code

53217-3519

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Svp Gen Cnsl & Sec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031319750-574

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

292.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Raymond J. Manista

Mailing Address 7236 N Crossway Rd

City

Fox Point

State

WI

Zip Code

53217-3519

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Svp Gen Cnsl & Sec

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-574

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. Steven C. Mannebach

Mailing Address 7818 Rogers Ave

City

Wauwatosa

State

WI

Zip Code

53213-1761

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Field Growth & Dev

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031319750-690

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Steven C. Mannebach

Mailing Address 7818 Rogers Ave

City

Wauwatosa

State

WI

Zip Code

53213-1761

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Field Growth & Dev

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-690

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

308.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. David C. Mc Avoy

Mailing Address 11 Mountview Rd

City State Zip Code
Wellesley MA 02481-2757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-3

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. David C. Mc Avoy

Mailing Address 11 Mountview Rd

City State Zip Code
Wellesley MA 02481-2757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-3

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. Roger M. Mc Queen

Mailing Address 5820 E Twin Creek Rd

City State Zip Code
Salt Lake Cty UT 84108-3605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-2

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

491.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Roger M. McQueen

Mailing Address 5820 E Twin Creek Rd

City State Zip Code
Salt Lake Cty UT 84108-3605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-2

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Brian W. McClure

Mailing Address 1402 Wyndemere Point Dr

City State Zip Code
Champaign IL 61822-3349

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-64

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Brian W. McClure

Mailing Address 1402 Wyndemere Point Dr

City State Zip Code
Champaign IL 61822-3349

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-64

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

159.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Mark J. McLennon

Mailing Address 2571 N 86th St

City

Wauwatosa

State

WI

Zip Code

53226-1921

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Ips Bus Dev

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

204.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-608

Amount of Each Receipt this Period

34.00

Full Name (Last, First, Middle Initial)

B. John W. McTigue

Mailing Address 205 E 4th St

City

Hinsdale

State

IL

Zip Code

60521-4603

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031782820-6

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. John W. McTigue

Mailing Address 205 E 4th St

City

Hinsdale

State

IL

Zip Code

60521-4603

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-6

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Jim E. Meeks Jr.

Mailing Address 2460 Lennox Dr

City State Zip Code
 Germantown TN 38138-4925

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-21

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

B. Jim E. Meeks Jr.

Mailing Address 2460 Lennox Dr

City State Zip Code
 Germantown TN 38138-4925

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-21

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

C. Joseph F. Meier

Mailing Address 208 Long Acres Ln

City State Zip Code
 Oviedo FL 32765-7843

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-10

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Joseph F. Meier

Mailing Address 208 Long Acres Ln

City State Zip Code
Oviedo FL 32765-7843

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-10

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Ben Miller

Mailing Address 11315 E Winchcomb Dr

City State Zip Code
Scottsdale AZ 85255-1638

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-56

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Ben Miller

Mailing Address 11315 E Winchcomb Dr

City State Zip Code
Scottsdale AZ 85255-1638

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-56

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Kevin E. Miller

Mailing Address 214 Schenley Rd

City State Zip Code
Pittsburgh PA 15217-1171

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-40

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. Kevin E. Miller

Mailing Address 214 Schenley Rd

City State Zip Code
Pittsburgh PA 15217-1171

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-40

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. Christian Mitchell

Mailing Address 640 E Carlisle Ave

City State Zip Code
Whitefish Bay WI 53217-4832

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NML

VP Corp Plng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031319750-634

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

466.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Christian Mitchell

Mailing Address 640 E Carlisle Ave

City

Whitefish Bay

State

WI

Zip Code

53217-4832

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Corp Plng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-634

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. William H. Norton

Mailing Address 10145 Wavell Rd

City

Fairfax

State

VA

Zip Code

22032-2337

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031319750-539

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. William H. Norton

Mailing Address 10145 Wavell Rd

City

Fairfax

State

VA

Zip Code

22032-2337

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-539

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Gregory C. Oberland

Mailing Address 4746 N Cumberland Blvd

City State Zip Code
Whitefish Bay WI 53211-1147

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

EVP Prod, Sales and Mrkting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 15 2014

Transaction ID : 2014031319750-596

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. Gregory C. Oberland

Mailing Address 4746 N Cumberland Blvd

City State Zip Code
Whitefish Bay WI 53211-1147

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

EVP Prod, Sales and Mrkting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : 2014032719750-596

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. Eric S. Olson

Mailing Address 127 Fairmount Rd

City State Zip Code
Ridgewood NJ 07450-1422

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 15 2014

Transaction ID : 2014031782820-45

Amount of Each Receipt this Period

104.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

520.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Eric S. Olson

Mailing Address 127 Fairmount Rd

City State Zip Code
 Ridgewood NJ 07450-1422

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-45

Amount of Each Receipt this Period

104.00

Full Name (Last, First, Middle Initial)

B. Christen L. Partleton

Mailing Address 4832 N Shoreland Ave

City State Zip Code
 Whitefish Bay WI 53217-5821

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NML

VP Facility Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014032719750-859

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C. Brian G. Petrando

Mailing Address 9533 Marbella Dr

City State Zip Code
 Fort Worth TX 76126-1935

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-25

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

181.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Brian G. Petrando

Mailing Address 9533 Marbella Dr

City

Fort Worth

State

TX

Zip Code

76126-1935

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-25

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Matthew J. Plocher

Mailing Address 4324 Chevy Chase Dr

City

La Canada

State

CA

Zip Code

91011-3203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-49

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Matthew J. Plocher

Mailing Address 4324 Chevy Chase Dr

City

La Canada

State

CA

Zip Code

91011-3203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-49

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

292.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Charles R. Pruett

Mailing Address 900 20th Ave S
Apt 1414

City State Zip Code
Nashville TN 37212-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-51

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. Charles R. Pruett

Mailing Address 900 20th Ave S
Apt 1414

City State Zip Code
Nashville TN 37212-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-51

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. Steven M. Radke

Mailing Address 9600 N Crestwood Ct

City State Zip Code
Mequon WI 53092-5355

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Govt Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031319750-821

Amount of Each Receipt this Period

53.00

SUBTOTAL of Receipts This Page (optional)..... ►

469.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Steven M. Radke

Mailing Address 9600 N Crestwood Ct

City

Mequon

State

WI

Zip Code

53092-5355

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Govt Relations

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

318.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-821

Amount of Each Receipt this Period

53.00

Full Name (Last, First, Middle Initial)

B. Jeff D. Reeter

Mailing Address 7 Williamsburg Ln

City

Houston

State

TX

Zip Code

77024-5144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031782820-63

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Jeff D. Reeter

Mailing Address 7 Williamsburg Ln

City

Houston

State

TX

Zip Code

77024-5144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-63

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

303.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. David R. Remstad

Mailing Address 2634 N Lake Dr

City

Milwaukee

State

WI

Zip Code

53211-3837

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Svp & Chief Actuary

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

546.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031319750-751

Amount of Each Receipt this Period

91.00

Full Name (Last, First, Middle Initial)

B. David R. Remstad

Mailing Address 2634 N Lake Dr

City

Milwaukee

State

WI

Zip Code

53211-3837

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Svp & Chief Actuary

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

546.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-751

Amount of Each Receipt this Period

91.00

Full Name (Last, First, Middle Initial)

C. J. Daniel Rivers

Mailing Address 3601 River Ridge Cv

City

Prospect

State

KY

Zip Code

40059-8038

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031782820-23

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

390.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. J. Daniel Rivers

Mailing Address 3601 River Ridge Cv

City Prospect State KY Zip Code 40059-8038

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-23

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. Bethany M. Rodenhuis

Mailing Address 3900 N Lake Dr

City Shorewood State WI Zip Code 53211-2448

FEC ID number of contributing federal political committee.

C

Name of Employer

NML

Occupation

Svp Field Strat & Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031519750-636

Amount of Each Receipt this Period

99.00

Full Name (Last, First, Middle Initial)

C. Bethany M. Rodenhuis

Mailing Address 3900 N Lake Dr

City Shorewood State WI Zip Code 53211-2448

FEC ID number of contributing federal political committee.

C

Name of Employer

NML

Occupation

Svp Field Strat & Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-636

Amount of Each Receipt this Period

99.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

406.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Tammy M. Roou

Mailing Address N99W14710 Amber Dr

City

Germantown

State

WI

Zip Code

53022-6611

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP - Era

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031319750-812

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

B. Tammy M. Roou

Mailing Address N99W14710 Amber Dr

City

Germantown

State

WI

Zip Code

53022-6611

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP - Era

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-812

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

C. Matt Russo

Mailing Address 139 Deep Valley Rd

City

New Canaan

State

CT

Zip Code

06840-2804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-55

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

318.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Matt Russo

Mailing Address 139 Deep Valley Rd

City

New Canaan

State

CT

Zip Code

06840-2804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-55

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. R. Philip Sarnecki

Mailing Address 18240 Melrose Dr

City

Bucyrus

State

KS

Zip Code

66013-9081

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

625.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-36

Amount of Each Receipt this Period

104.17

Full Name (Last, First, Middle Initial)

C. R. Philip Sarnecki

Mailing Address 18240 Melrose Dr

City

Bucyrus

State

KS

Zip Code

66013-9081

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

625.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-36

Amount of Each Receipt this Period

104.17

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

416.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Joseph M. Savino

Mailing Address 8 Benedek Rd

City
Princeton

State
NJ

Zip Code
08540-2227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031782820-1

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. Joseph M. Savino

Mailing Address 8 Benedek Rd

City
Princeton

State
NJ

Zip Code
08540-2227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-1

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. Timothy G. Schaefer

Mailing Address 1013 E Lexington Blvd

City
Whitefish Bay

State
WI

Zip Code
53217-5381

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

EVP Ent Ops & Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031319750-858

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional)..... ►

526.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Timothy G. Schaefer

Mailing Address 1013 E Lexington Blvd

City

Whitefish Bay

State

WI

Zip Code

53217-5381

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

EVP Ent Ops & Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-858

Amount of Each Receipt this Period

110.00

Full Name (Last, First, Middle Initial)

B. John E. Schlifske

Mailing Address 1500 Greenway Ter

City

Elm Grove

State

WI

Zip Code

53122-1611

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Chairman, CEO & Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031319750-767

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. John E. Schlifske

Mailing Address 1500 Greenway Ter

City

Elm Grove

State

WI

Zip Code

53122-1611

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Chairman, CEO & Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-767

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

526.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Kathleen H. Schluter

Mailing Address 5057 N Palisades Rd

City

Whitefish Bay

State

WI

Zip Code

53217-5756

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP & Tax Cnsl

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-768

Amount of Each Receipt this Period

34.00

Full Name (Last, First, Middle Initial)

B. Calvin R. Schmidt

Mailing Address W205 Allen Rd

City

Oconomowoc

State

WI

Zip Code

53066-9048

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Svp Int Cust Ops

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031319750-792

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. Calvin R. Schmidt

Mailing Address W205 Allen Rd

City

Oconomowoc

State

WI

Zip Code

53066-9048

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Svp Int Cust Ops

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014032719750-792

Amount of Each Receipt this Period

85.00

SUBTOTAL of Receipts This Page (optional)..... ►

204.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Rodd Schneider

Mailing Address 1415 E Fairy Chasm Rd

City State Zip Code
 Bayside WI 53217-1433

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Litig & Dist Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014032719750-534

Amount of Each Receipt this Period

36.00

Full Name (Last, First, Middle Initial)

B. Todd M. Schoon

Mailing Address 9400 N Valley Hill R

City State Zip Code
 River Hills WI 53217

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

EVP Agencies

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031319750-1084

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. Todd M. Schoon

Mailing Address 9400 N Valley Hill R

City State Zip Code
 River Hills WI 53217

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

EVP Agencies

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014032719750-1084

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

452.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Robert Seery

Mailing Address 49 Green Ave

City State Zip Code
 Rye NY 10580-3141

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-26

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Robert Seery

Mailing Address 49 Green Ave

City State Zip Code
 Rye NY 10580-3141

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-26

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Brad P. Seitzinger

Mailing Address 920 Pine Needle Trl

City State Zip Code
 Oakland Twp MI 48306-1034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-39

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

458.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Brad P. Seitzinger

Mailing Address 920 Pine Needle Trl

City State Zip Code
 Oakland Twp MI 48306-1034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-39

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. David W. Simbro

Mailing Address 311 E Erie St
 Unit 4

City State Zip Code
 Milwaukee WI 53202-6040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NML

Svp Life & Ann Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031519750-1073

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

C. David W. Simbro

Mailing Address 311 E Erie St
 Unit 4

City State Zip Code
 Milwaukee WI 53202-6040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NML

Svp Life & Ann Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014032719750-1073

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

348.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Paul W. Skalecki

Mailing Address W69N463 Fox Pointe A

City

Cedarburg

State

WI

Zip Code

53012

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Uw Standards

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-884

Amount of Each Receipt this Period

39.00

Full Name (Last, First, Middle Initial)

B. Steve P. Sperka

Mailing Address S67W17735 Copper Oaks Ct

City

Muskego

State

WI

Zip Code

53150-7503

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Ltc

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

390.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031319750-796

Amount of Each Receipt this Period

65.00

Full Name (Last, First, Middle Initial)

c. Steve P. Sperka

Mailing Address S67W17735 Copper Oaks Ct

City

Muskego

State

WI

Zip Code

53150-7503

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Ltc

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

390.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-796

Amount of Each Receipt this Period

65.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

169.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. David G. Stoeffel

Mailing Address 6311 N Lake Dr

City

Whitefish Bay

State

WI

Zip Code

53217-4343

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Planning & Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-885

Amount of Each Receipt this Period

37.00

Full Name (Last, First, Middle Initial)

B. Peter F. Striano III

Mailing Address 11050 NW 78th PI

City

Parkland

State

FL

Zip Code

33076-4723

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031782820-52

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Peter F. Striano III

Mailing Address 11050 NW 78th PI

City

Parkland

State

FL

Zip Code

33076-4723

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-52

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

287.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Christopher P. Swain

Mailing Address 10927 N Wyngate Trce

City State Zip Code
Mequon WI 53092-5862

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Msa Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2014

Transaction ID : 2014032719750-833

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. Michael F. Tews

Mailing Address 609 S 249th Cir

City State Zip Code
Waterloo NE 68069-4432

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
03 15 2014

Transaction ID : 2014031782820-20

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Michael F. Tews

Mailing Address 609 S 249th Cir

City State Zip Code
Waterloo NE 68069-4432

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2014

Transaction ID : 2014033119749-20

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

285.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Scott P. Theodore

Mailing Address 12505 Ventana Mesa Cir

City State Zip Code
Castle Pines CO 80108-9148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-32

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. Scott P. Theodore

Mailing Address 12505 Ventana Mesa Cir

City State Zip Code
Castle Pines CO 80108-9148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-32

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. Alex J. Tronco

Mailing Address 11 Stoneridge Dr

City State Zip Code
Loudonville NY 12211-2625

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-60

Amount of Each Receipt this Period

62.50

SUBTOTAL of Receipts This Page (optional)..... ►

478.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Alex J. Tronco

Mailing Address 11 Stoneridge Dr

City Loudonville State NY Zip Code 12211-2625

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-60

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

B. Leo C. Tucker

Mailing Address 605 Potomac River Rd

City Mc Lean State VA Zip Code 22102-1402

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031782820-48

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Leo C. Tucker

Mailing Address 605 Potomac River Rd

City Mc Lean State VA Zip Code 22102-1402

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014033119749-48

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

312.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. P. Andrew Ware

Mailing Address 7900 N Berwyn Ave

City State Zip Code
 Glendale WI 53209-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP & Corporate Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014032719750-518

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Alison F. Watson

Mailing Address 420 Independence Ave SE

City State Zip Code
 Washington DC 20003-1046

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Dir Fed Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031319750-1055

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Alison F. Watson

Mailing Address 420 Independence Ave SE

City State Zip Code
 Washington DC 20003-1046

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Dir Fed Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014032719750-1055

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Richard Worrell

Mailing Address 2423 Beretania Cir

City State Zip Code
Charlotte NC 28211-3631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.02

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-59

Amount of Each Receipt this Period

166.67

Full Name (Last, First, Middle Initial)

B. Richard Worrell

Mailing Address 2423 Beretania Cir

City State Zip Code
Charlotte NC 28211-3631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.02

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-59

Amount of Each Receipt this Period

166.67

Full Name (Last, First, Middle Initial)

C. John William Wright II

Mailing Address 510 King Rd NW

City State Zip Code
Atlanta GA 30342-4011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-38

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

433.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. John William Wright II

Mailing Address 510 King Rd NW

City State Zip Code
 Atlanta GA 30342-4011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-38

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Conrad C. York

Mailing Address 1313 N Franklin Pl

City State Zip Code
 Milwaukee WI 53202-2980

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031319750-772

Amount of Each Receipt this Period

97.00

Full Name (Last, First, Middle Initial)

c. Conrad C. York

Mailing Address 1313 N Franklin Pl

City State Zip Code
 Milwaukee WI 53202-2980

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014032719750-772

Amount of Each Receipt this Period

97.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

294.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. T. Scott Zach

Mailing Address 6630 Country Creek Ln

City

Cedar Rapids

State

IA

Zip Code

52403-7023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031782820-54

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. T. Scott Zach

Mailing Address 6630 Country Creek Ln

City

Cedar Rapids

State

IA

Zip Code

52403-7023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 2014033119749-54

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Thomas D. Zale

Mailing Address 2818 E Menlo Blvd

City

Shorewood

State

WI

Zip Code

53211-2652

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2014

Transaction ID : 2014031319750-798

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Thomas D. Zale

Mailing Address 2818 E Menlo Blvd

City

Shorewood

State

WI

Zip Code

53211-2652

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

Managing Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-798

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Rick T. Zehner

Mailing Address 203 W Ravine Baye Rd

City

Bayside

State

WI

Zip Code

53217-1334

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Research & Special Projects

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 31 / 2014

Transaction ID : 2014032719750-989

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

c. Todd O. Zinkgraf

Mailing Address 118 Ferris Dr

City

North Prairie

State

WI

Zip Code

53153-9455

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Ent Solutions

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

492.00

Date of Receipt

03 / 15 / 2014

Transaction ID : 2014031319750-1018

Amount of Each Receipt this Period

82.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

167.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 94
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Todd O. Zinkgraf

Mailing Address 118 Ferris Dr

City State Zip Code
 North Prairie WI 53153-9455

FEC ID number of contributing
federal political committee.

C

Name of Employer

NML

Occupation

VP Ent Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014032719750-1018

Amount of Each Receipt this Period

82.00

Full Name (Last, First, Middle Initial)

B. Jeffrey Zuzolo

Mailing Address 104 Wildwood Dr

City State Zip Code
 Avon CT 06001-4413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : 2014031782820-14

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

C. Jeffrey Zuzolo

Mailing Address 104 Wildwood Dr

City State Zip Code
 Avon CT 06001-4413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 2014033119749-14

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

498.00

TOTAL This Period (last page this line number only)..... ►

24371.66

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 80 OF 94

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. US Bank

Mailing Address 777 E.Wisconsin Ave.

City Milwaukee State WI Zip Code 53202

Purpose of Disbursement
Service Charge

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 14 2014**Transaction ID : 723095632E0EDF888A5**

Amount of Each Disbursement this Period

243.17

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

243.17

243.17

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Ami Bera for Congress

Mailing Address PO Box 582496

City	State	Zip Code
Elk Grove	CA	95758

Purpose of Disbursement
2014 Primary

Candidate Name

Ameriash B. BeraOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : ACE2B7192D943EC79AD

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Andy Barr for Congress, Inc.

Mailing Address PO Box 2059

City	State	Zip Code
Lexington	KY	40588

Purpose of Disbursement
2014 Primary

Candidate Name

Garland Hale Barr IVOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2014

Transaction ID : 31CC538A672886CE7CA

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Collins for Senator

Mailing Address PO Box 1096

City	State	Zip Code
Bangor	ME	04402

Purpose of Disbursement
2014 Primary

Candidate Name

Susan Margaret CollinsOffice Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: ME District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	10	/	2014

Transaction ID : 08C29A82F5A12DEDD0B

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. DelBene for Congress

Mailing Address PO Box 487

City	State	Zip Code
Bothell	WA	98041

Purpose of Disbursement
2014 Primary

011

Candidate Name

Suzan Kay DelBeneCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : C0AB3050053DD6AF6A7

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Dold for Congress

Mailing Address PO Box 6312

City	State	Zip Code
Libertyville	IL	60048

Purpose of Disbursement
2014 Primary

011

Candidate Name

Robert James Dold Jr.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	12	/	2014

Transaction ID : 06891A17FAABB04B990

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Freedom FundMailing Address 701 8th Street, NW
Suite 500

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement
2014 Contribution

011

Candidate Name

Freedom FundCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
Contribution

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2014

Transaction ID : 137EB92D1A1449ED442

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Friends of Chris Murphy

Mailing Address PO Box 127

City	State	Zip Code
Cheshire	CT	06410

Purpose of Disbursement
2018 Convention

011

Candidate Name

Christopher S. MurphyCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

State: CT

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2014

Transaction ID : AEF425A1F796EDF6855

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Dan Maffei

Mailing Address PO Box 230

City	State	Zip Code
Syracuse	NY	13201

Purpose of Disbursement
2014 Primary

011

Candidate Name

Daniel Benjamin MaffeiCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 4FDFAF6F96434791599

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Elizabeth Esty

Mailing Address PO Box 61

City	State	Zip Code
Cheshire	CT	06410

Purpose of Disbursement
2014 Convention

011

Candidate Name

Elizabeth EstyCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: CT

District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : DA27D6487624AE38D3C

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Friends of John Barrow

Mailing Address PO Box 1001

City Augusta	State GA	Zip Code 30903
-----------------	-------------	-------------------

Purpose of Disbursement
2014 Primary

011

Candidate Name

John Jenkins BarrowCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 94625504B87B19F2EA0

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Lois Capps

Mailing Address PO Box 23940

City Santa Barbara	State CA	Zip Code 93121
-----------------------	-------------	-------------------

Purpose of Disbursement
2014 Primary

011

Candidate Name

Lois CappsCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 52287D64B33FBBC9A32

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Mark Warner

Mailing Address 201 North Union Street Suite 300

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Disbursement
2014 General

011

Candidate Name

Mark Robert WarnerCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: VA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	26	/	2014

Transaction ID : 55B58B60BDB4C57DA28

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Friends of Pat Toomey

Mailing Address 228 S. Washington St., Suite 115

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
2016 General

011

Candidate Name

Patrick Joseph ToomeyCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: PA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : A959F3DFAD8C96FFB95

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Patrick Murphy

Mailing Address 4521 Pga Blvd. #412

City	State	Zip Code
Palm Beach Gardens	FL	33418

Purpose of Disbursement
2014 Primary

011

Candidate Name

Patrick E. MurphyCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: FL District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : FBCB23E392728158AC4

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Pete Gallego

Mailing Address PO Box 1781

City	State	Zip Code
San Antonio	TX	78296

Purpose of Disbursement
2014 General

011

Candidate Name

Pete P. GallegoCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TX District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : 595B43A4F37795123BF

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Giving Willingly Empowering Nationally (GWEN) PAC

Mailing Address PO Box 70980

City Washington	State DC	Zip Code 20024
--------------------	-------------	-------------------

Purpose of Disbursement
2014 Contribution

011

Candidate Name

Giving Willingly Empowering Nationally (GWEN) PACCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : 87F79480F528713FB79

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Hagan for US Senate Inc

Mailing Address PO Box 29103

City Greensboro	State NC	Zip Code 27429-9103
--------------------	-------------	------------------------

Purpose of Disbursement
2014 General

011

Candidate Name

Kay R. HaganCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NC District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 7E8CE76F63ED4A57599

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Hoyer for CongressMailing Address 700 13th Street, NW
Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Disbursement
2014 Primary

011

Candidate Name

Steny H. HoyerCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MD District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : 23EDEFB6EAF585F67B4

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Jim Renacci for Congress

Mailing Address 150 Smokerise Drive

City Wadsworth	State OH	Zip Code 44281-8701
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Purpose of Disbursement
2014 Primary

011

Candidate Name

James B. RenacciCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

Transaction ID : 1610EF6FB87C04CC65C

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Jim Risch for U S Senate Committee

Mailing Address 407 W Jefferson

City Boise	State ID	Zip Code 83702
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Purpose of Disbursement
2014 Primary

011

Candidate Name

James E. RischCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: ID District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2014

Transaction ID : 555501AA59D2F2D46CD

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Joe Garcia for Congress

Mailing Address PO Box 330871

City Miami	State FL	Zip Code 33233
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Purpose of Disbursement
2014 Primary

011

Candidate Name

Jose A. GarciaCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : AF75BA736EA0F46C983

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Kirkpatrick for Arizona

Mailing Address PO Box 12011

City	State	Zip Code
Casa Grande	AZ	85130

Purpose of Disbursement
2014 Primary

011

Candidate Name

Ann KirkpatrickCategory/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: AZ District: 01

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 5D1CD40358052962F81

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Kuster for Congress, Inc.

Mailing Address PO Box 1498

City	State	Zip Code
Concord	NH	03302

Purpose of Disbursement
2014 Primary

011

Candidate Name

Ann McLane KusterCategory/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: NH District: 02

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 02086F24EF79431B689

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Kyrsten Sinema for Congress

Mailing Address PO Box 25879

City	State	Zip Code
Tempe	AZ	85285

Purpose of Disbursement
2014 Primary

011

Candidate Name

Kyrsten SinemaCategory/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: AZ District: 09

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 1917D275D90C0E85C13

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

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SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 89 OF 94

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Larson for Congress

Mailing Address PO Box 261172

City Hartford State CT Zip Code 06126-1172

Purpose of Disbursement
2014 Convention

Candidate Name

John B. Larson

Office Sought: ☒ House
☐ Senate
☐ President

State: CT District: 01

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼

011

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 27 2014

Transaction ID : 378E834A8997CB8F115

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Larson for Congress

Mailing Address PO Box 261172

City Hartford State CT Zip Code 06126-1172

Purpose of Disbursement
2014 General

Candidate Name

John B. Larson

Office Sought: ☒ House
☐ Senate
☐ President

State: CT District: 01

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

011

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 27 2014

Transaction ID : 639D80E0658862F6715

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. M-PAC

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
2014 Contribution

Candidate Name

M-PAC

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼

Contribution

011

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : B0DA44B116DE55E907E

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Mulvaney for Congress

Mailing Address PO Box 1975

City Lancaster	State SC	Zip Code 29721
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Purpose of Disbursement
2014 Primary

011

Candidate Name

John Michael MulvaneyCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 5FE5235E437437ED5FC

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Neugebauer Congressional Committee

Mailing Address PO Box 54175

City Lubbock	State TX	Zip Code 79453-4175
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Purpose of Disbursement
2014 General

011

Candidate Name

Robert Randolph NeugebauerCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	26	/	2014

Transaction ID : 4C1C2CD2F628C9EA30E

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Nunnelee for CongressMailing Address 438 East Main St
PO Box 7092

City Tupelo	State MS	Zip Code 38802
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Purpose of Disbursement
2014 Primary

011

Candidate Name

Patrick Alan NunneleeCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MS District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	20	/	2014

Transaction ID : 0D1A88CF7450593A633

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Perlmutter for CongressMailing Address 3440 Youngfield Street
#264

City Wheat Ridge State CO Zip Code 80033

Purpose of Disbursement
2014 Primary

Candidate Name

Edwin G. PerlmutterOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2014

Transaction ID : 4E99B99E23F7D89AA6A

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Ribble for Congress

Mailing Address PO Box 7200

City Appleton State WI Zip Code 54912-7069

Purpose of Disbursement
2014 General

Candidate Name

Reid RibbleOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: WI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2014

Transaction ID : A937CB6ACF4708CD5DB

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Ron Barber for Congress

Mailing Address PO Box 57715

City Tucson State AZ Zip Code 85732

Purpose of Disbursement
2014 Primary

Candidate Name

Ron BarberOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 4610DC4B28B4B54C1F8

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Royce Campaign Committee

Mailing Address PO Box 3249

City Fullerton	State CA	Zip Code 92834-3249
-------------------	-------------	------------------------

Purpose of Disbursement
2014 Primary

Candidate Name

Edward R. RoyceOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 39

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2014

Transaction ID : 25F7B9D160960189314

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Schneider for Congress

Mailing Address PO Box 1318

City Deerfield	State IL	Zip Code 60015
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Purpose of Disbursement
2014 General

Candidate Name

Bradley Scott SchneiderOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : EC132D14A3D9EE0CD21

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Scott Peters for Congress

Mailing Address PO Box 70980

City Washington	State DC	Zip Code 20024
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Purpose of Disbursement
2014 Primary

Candidate Name

Scott H. PetersOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 52

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 8566D9203E0E95B4E33

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Sean Patrick Maloney for Congress

Mailing Address PO Box 270

City	State	Zip Code
Newburgh	NY	12550

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Sean Patrick MaloneyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : CB44001A6E83A98B2A3

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Stivers for Congress

Mailing Address 4679 Winterset Drive

City	State	Zip Code
Columbus	OH	43220-8113

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Steve StiversOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	12	/	2014

Transaction ID : 33A58C42D8CD7AB403F

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Strickland for Congress

Mailing Address PO Box 630446

City	State	Zip Code
Simi Valley	CA	93063

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Anthony A. StricklandOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 25

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2014

Transaction ID : A941F7344CCC8B5D48B

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 94 OF 94

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Texans for Senator John Cornyn Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	28	/	2014

Mailing Address PO Box 13026

City	State	Zip Code
Austin	TX	78711

Transaction ID : 2F942D0EA63DAC90296Purpose of Disbursement
2014 General

011

Amount of Each Disbursement this Period

2500.00

Candidate Name

John Cornyn IIICategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX

District:

Full Name (Last, First, Middle Initial)

B. The Hawkeye PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2014

Mailing Address PO Box 192

City	State	Zip Code
Des Moines	IA	50301

Transaction ID : 5C613A43220ECA3AA34Purpose of Disbursement
2014 Contribution

011

Amount of Each Disbursement this Period

5000.00

Candidate Name

The Hawkeye PACCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Contribution

Full Name (Last, First, Middle Initial)

C. Tiberi for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2014

Mailing Address 2931 E Dublin Granville Road
Suite 190

City	State	Zip Code
Columbus	OH	43231-2098

Transaction ID : 4358B0C246F8B9020CDPurpose of Disbursement
2014 General

011

Amount of Each Disbursement this Period

1000.00

Candidate Name

Patrick J. TiberiCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 12

SUBTOTAL of Disbursements This Page (optional)..... ►

8500.00

TOTAL This Period (last page this line number only)..... ►

71000.00